



## Clinical practice

## Leda and the Swan – And other myths about rape

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## ABSTRACT

In his David Jenkins Memorial Lecture, Dr Norfolk discusses rape and some of the myths that surround the topic, exploring the research evidence about conviction rates, false allegations, clinician gender preferences of rape victims and the role of sexual assault referral centres in service delivery.

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## 1. Introduction

Mr President, ladies and gentlemen.

Thank you for the honour you have done me by inviting me to deliver the David Jenkins Professorial lecture. As I stand before you, I am conscious of the fact that I have the opportunity to ensure that the memory and reputation of David Jenkins lives on and is celebrated this evening. This is an opportunity that I do not take lightly as David was a dear friend who had a huge influence on forensic and legal medicine through his long life of exemplary endeavour in the speciality. It truly is a privilege to be delivering this lecture in his honour.

In preparing for this lecture I have undertaken a literature review and wish to talk about rape and, in particular, some of the myths that surround the subject.

## 2. The rape of Leda

Myths were part of the religion in ancient Greece and modern scholars continue to study them in an attempt to throw light on the religious and political institutions of the Ancient Greeks and their civilisation. I have taken for the title of this talk one such Greek myth, namely the rape of Leda.

The story is familiar enough. Zeus was attracted to Leda and, assuming the shape of a Swan, raped her when she was having a swim. The rape is said to have taken place on the same night that Leda slept with her husband King Tyndareus. As a result of these

couplings, Leda subsequently gave simultaneous birth to Helen of Troy, daughter of Zeus, as well as the twins Castor and Clytemnestra, children of her husband.

Zeus, the father and ruler of all the gods of Ancient Greece, was notorious for his numerous dalliances with mortal women. Indeed the tales of Zeus' philandering were part of a scandalous, and to us astonishing, view held by the early Greeks of their gods, who they saw as all powerful but nonetheless sharing in human vices such as vanity, jealousy and sexual promiscuity. One could almost argue that the myths catered for the salacious voyeurism of the ancient Greeks just as the gossip columns of the tabloid press do for us today. Thus, if there had been a popular press in those days, one can easily imagine the headlines (Fig. 1).

The rape of Leda was a well-known myth during the Middle Ages, but emerged more prominently in the Italian Renaissance, when the story developed erotic overtones. Leda's rape has been depicted in countless artistic renderings and has been illustrated by both da Vinci (Fig. 2) and Michelangelo (Fig. 3). Interpretations of the story can also be found as far afield as sculptures in Madhya Pradesh, India (Fig. 4) to modern hotels signs in Berlin (Fig. 5).

What is interesting about all these artistic interpretations is that they depict Leda's attitude as highly ambiguous at best. Thus, Leonardo da Vinci's interpretation, far from depicting a scene of rape, looks more like a Victorian photograph of a doting couple and the sculptures illustrated appear to show Leda in a state of erotic compliance.

It was not, perhaps, until William Butler Yeats published his sonnet 'Leda and the Swan' in 1928, that one gets an image of the destructive nature of rape. Here Yeats describes Leda's helplessness and terror in the face of a sudden assault. It is an unambiguously brutal rape after which the victim is indifferently discarded.

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Fig 1. The Rape of Leda.

### Leda and the Swan

*A sudden blow: the great wings beating still  
Above the staggering girl, her thighs caressed  
By the dark webs, her nape caught in his bill,  
He holds her helpless breast upon his breast.  
How can those terrified vague fingers push  
The feathered glory from her loosening thighs?  
And how can body, laid in that white rush,  
But feel the strange heart beating where it lies?*

*A shudder in the loins engenders there  
The broken wall, the burning roof and tower  
And Agamemnon dead.  
Being so caught up,  
So mastered by the brute blood of the air,  
Did she put on his knowledge with his power  
Before the indifferent beak could let her drop?*  
W B Yeats, 1928

The confused interpretation of the Rape of Leda from the times of the Ancient Greeks to the modern day perhaps reflects contemporary confusion and controversy about the offence of rape in general. Some of that controversy and confusion has been fuelled by the perpetration of myths that have arisen through misguided academic research and ill-informed political initiatives. My address this evening aims to debunk some of those myths.

### 3. Rape in England and Wales

Rape is a terrible crime – a crime that happens too often. Victims may be women, men, children, people of all ages and all social groups. It is a unique violation that can cause severe and long lasting harm to victims. In addition to the immense personal cost to



Fig 2. Leda and the Swan – da Vinci.

the victims there is also a financial cost to society. In 2003–04, the overall cost to society of sexual offences was estimated at £8.5 billion, with each rape costing over £76,000.<sup>1</sup> Much of this cost is made up of lost output and costs to the health service resulting from long term health issues faced by victims.

Whilst it is impossible to know for certain how frequently rape occurs, official crime statistics show that in England and Wales in 2008/09, there were 12,165 rapes of women reported to the police.<sup>2</sup> The results of the British Crime Survey suggest that only 12% of women who have been seriously sexually assaulted tell the police about it,<sup>3</sup> so we can extrapolate that there are over 100,000 rapes of women in England and Wales each year (equivalent to about 270/day).



Fig 3. Leda and the Swan after Michelangelo.





Fig 4. The Scindia Museum, Madhya Pradesh, India.

#### 4. Conviction rates for rape

*“There has been progress in tackling rape; but the fact is conviction rates are far too low”<sup>4</sup>*

Solicitor General Vera Baird QC

Only about 6.5% of reported rapes result in a conviction. This figure has been the subject of much political and media attention.<sup>5</sup> Whilst some may have found the figure helpful to use as a campaigning tool for an improvement in the way rape cases are dealt with, the figure is misleading and needs to be considered in greater detail.

The way the conviction rate for rape is calculated is unusual and no such rates are published or even measured for other crimes so comparison is difficult. ‘Conviction rate’ usually describes the percentage of all the cases that are brought to court that end in a conviction. However, when dealing with rape, the term has come to describe the percentage of all cases recorded by the police as rape that end up with someone being convicted of rape. The use of a much larger denominator has the inevitable consequence of producing a much lower figure for the conviction rate.

##### 4.1. Attitudes towards rape and their influence on conviction rates

The unusual way of calculating conviction rates in rape introduces the risk that the cause of the apparent low 6.5% rate in the UK may be misattributed. For example, in June 2009, the Solicitor



Fig 5. Street sculpture, Hotel Estrel, Berlin.

General, Vera Baird, suggested that it was myths about rape that were skewing the deliberations of jurors and resulting in the low conviction rate. This belief led her to call for judges to give directions to jurors not to assume that the victim was “asking for it” because of the way she dressed, her behaviour or her demeanour.<sup>6</sup>

Baird correctly highlighted some of the common myths held by members of the public about rape victims. Some of these myths were exposed by a survey conducted by Amnesty International in 2005 which showed that more than a quarter of respondents thought that a victim was partially or totally responsible for being raped if she was wearing sexy or revealing clothing and about one third thought likewise if the woman was drunk or acting in a flirtatious manner.<sup>7</sup> It was noteworthy that there were very few gender differences in these attitudes; with the only stand out difference relating to male opinion that dressing in a certain way can make a woman responsible for rape.

In a similar vein, research with mock jurors suggests that many still mistakenly expect rape victims to fight back against their attacker, to sustain serious physical injuries, report the offence immediately and appear tearful and distressed when reporting.<sup>8,9</sup> So, while there is no doubt that there are many misconceptions about rape victims, was Baird correct to claim that jurors were unable to put aside these stereotypes when deciding the guilt or innocence of a man being tried for rape? Certainly, the Lord Chief Justice, Lord Judge, urged caution before jumping to that conclusion, saying “We can’t launch off from an uncertain base. We can’t be blind to what proves to be reality but we must be sure it is a reality and not a view of a particular individual”.<sup>10</sup>

So, let us look at the evidence? The definitive answer appears to have been provided by Professor Cheryl Thomas and research she conducted on behalf of the Ministry of Justice about the fairness of the jury decision-making process.<sup>11</sup> Thomas found that, contrary to popular belief and previous government reports, juries actually convict more often than they acquit in rape cases (with 55% of cases that go to a jury resulting in a conviction). She found that other serious offences have lower jury conviction rates than rape (Fig. 6) and concluded that juries are not primarily responsible for the so-called low conviction rate in rape allegations. Furthermore, her observation that there were high conviction rates for some female complainants and low conviction rates for some male complainants challenged the view that a failure to convict in rape cases is due to juror bias against female complainants.

##### 4.2. Attrition rates

So, if the conviction rate of cases going to a jury is 55%, what is the significance of the often-quoted six per cent figure? The figure

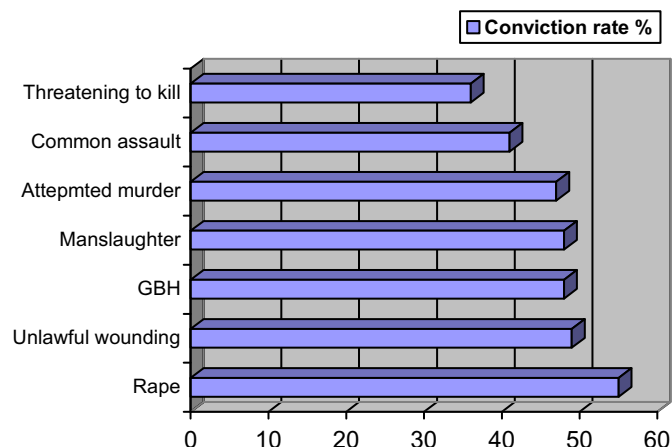


Fig 6. Jury conviction rates for specific offences 2006/08 (Source: *Are Juries Fair?*<sup>11</sup>).

is better referred to as the attrition rate and means that out of every 100 cases of rape recorded by the police, six of them will lead to a suspect being convicted of rape. The attrition figure has been the cause of considerable concern and, in order to make sense of the figure, it is important to understand the reasons a proportion of the 100 cases reported to the police will not proceed through the system to the courtroom and end in a conviction. At the police stage of the investigation cases may not proceed because of:

- a) No crime – this covers cases recorded in error; those where the offence took place in another jurisdiction; where there is credible evidence that no offence took place; and false allegations.
- b) No further action – includes cases where an offender is not identified; where the victim withdraws; and cases in which it is deemed there is insufficient evidence to proceed with charging the suspect.

Cases that proceed to the Crown Prosecution Service may be discontinued if the victim withdraws at that stage or where there is considered to be no realistic prospect of obtaining a conviction. At the court stage, further attrition may occur if the suspect is acquitted or if he is found guilty of a lesser offence than rape (about 6–7% of cases result in a conviction for a lesser sexual offence, providing an overall attrition rate of 12–13%<sup>12</sup>).

#### 4.3. Comparable attrition rates

So is the attrition rate in the UK as bad as suggested? A comprehensive review conducted in 2009 of all the reliable studies on rape and attrition from 5-English speaking countries with similar legal systems suggested that our figure of 12% of cases that end in a conviction for rape or another sexual offence is not untypical. The study gives a comparable figure of 14% for the United States and Canada, 11.5% for Australia and 17.5% for Scotland.<sup>13</sup>

Data on attrition rates for other crimes in the UK are not routinely published but in August 2009, Ruth Alexander reported comparable attrition rates for a number of other crimes on the BBC Radio 4 show 'More or Less' (Table 1).<sup>14</sup>

Furthermore, analysis of flows through the Criminal Justice System during 2008 suggests an overall attrition rate of 6.7% for all recorded crime in England and Wales<sup>15</sup> (Table 2).

#### 4.4. Does a headline 'conviction rate' of 6% matter?

Does any of this matter? The widely quoted six per cent conviction rate has the real potential of deterring rape victims from reporting the crime to the police. After all, a victim might argue, what is the point of telling the police if there is only a 6% chance of securing a conviction? Furthermore, the six per cent figure may not only discourage victims from reporting but may also distort the way complaints of rape are investigated and prosecuted. Calls from politicians and lobbyists to increase the conviction rate in rape are

**Table 1**  
Attrition rate for crimes.

Attrition rate for:	
Attempted murder	14%
Robbery	10%
Cruelty to and neglect of children	9%
Rape	6.5%
Burglary	4%
Violence Against the Person	4%
Criminal Damage	1%

Source: BBC "More or Less" August 28, 2009.

**Table 2**

Calculated attrition rate for all recorded crimes 2008.

FLOWS THROUGH THE CRIMINAL JUSTICE SYSTEM 2008	
Recorded crime	4,702,500 (100%)
Offences detected	1,335,800 (28%)
Charged or summonsed	698,800 (14.8%)
Found guilty at court	316,800 (6.7%)

Source: Criminal Statistics: England and Wales 2008<sup>15</sup>.

only justified if the goal is not solely an increase in the headline conviction rate itself, but rather an increase in the conviction rate of the guilty.

For example, exhortations from a senior police officer for investigators to "absolutely accept the victim's version of events unless there are very substantial reasons to do otherwise"<sup>16</sup> are no doubt well-intentioned. However, it is important to point out that, although the police should always handle complainants with sensitivity and a demonstrable willingness to take on board the complainant's account, the investigator's primary role is to keep an open mind throughout and to pursue all reasonable lines of enquiry, even if these point to the innocence of the suspect. Believing the complainant's account above all else runs the risk of jeopardising a proper investigation.

#### 4.5. Conviction rates – a summary

- The true jury conviction rate for rape is about 55%
- There is no evidence that juries are responsible for the supposed low conviction rate in rape
- The attrition rate of 6% for rape is not that dissimilar to other countries and other crimes in the UK
- The way in which the 6% conviction rate has dominated public discourse on rape without proper explanation, analysis and context has been extremely unhelpful

### 5. False allegations

The question of false allegations comes up time and again in any discussion about rape, with some arguing that the number of such allegations is large and others insisting that the prevalence is grossly exaggerated. Before looking at the evidence relating to the prevalence of such allegations, it is worthwhile considering what we mean by the term 'false allegation' and reflecting on some of the reasons people may make false complaints of rape to the police.

Unfortunately, there is a lack of any consensus about what constitutes a false allegation and, indeed, an allegation could be considered false for a number of different reasons<sup>17</sup> (Fig. 7). At its most basic level, a false allegation can be defined as the report of

### False allegations of sexual assault

#### What do we mean by false?

Retracted?  
Malicious?  
Not proceeded with?  
Not proven?  
Mistaken?  
Coerced?

**Fig 7.** False allegations of sexual assault.

a rape made by a complainant who knows the event never occurred – in other words a deliberate fabrication. This definition implies a conscious or malicious motive on the part of the complainant, a definition that some argue is too narrow because it fails to include falsely held or erroneous memories where, for example, a complainant mistakenly believes she may have been assaulted while asleep, unconscious or affected by alcohol/drugs.<sup>18</sup> Guidelines for the police require that a complaint of rape should only be 'no-crimed' as a false allegation if 'the complainant retracts completely and admits to fabrication'.<sup>19</sup> These are strict criteria, although evidence suggests that reports of rape may be no-crimed for reasons other than the complaint being false or malicious.<sup>19</sup>

Reasons people have made false allegations of rape include<sup>18,20</sup>

- Revenge – for example, to retaliate against a rejecting male or a difficult neighbour
- Cover up – to provide an alibi where, for example, the complainant is in fear of pregnancy or discovery of illicit consensual intercourse
- As an attention or sympathy-seeking device – said to be the most socially harmless motive as usually no-one is identified as the rapist
- Mental illness
- Financial gain – suggested by some but probably the least clear cut of the motives<sup>21,22</sup>

### 5.1. The prevalence of false rape allegations

When discussing false allegations commentators frequently refer to the 'official' rate of false allegations as being about 2% and state that false rape complaints are no more common than for other offences. However, it is difficult to find the empirical evidence on which these claims are based. Indeed, it has been suggested that the claims have now become so engrained that they are simply repeated over and over again without any reference to supporting evidence at all.<sup>23</sup>

There are a number of very good reasons to critically evaluate the reliability of the 'official view' about the rate of false allegations. Firstly, without solid evidence about the prevalence of false rape complaints there is a danger that opinion may be unduly influenced by sensationalist media coverage about women who make false allegations – media coverage being no substitute for empirical research. Secondly, incorrect or unreliable assumptions about false complaints provide a poor basis on which to develop appropriate policy responses to rape. False allegations also raise the possibility of miscarriages of justice; they divert attention from genuine victims and may deter such victims from reporting rape to the police. Finally, in the words of Lord Chief Justice, Lord Judge; "every occasion of a proved false allegation has an insidious effect in public confidence in the truth of genuine complaints, sometimes allowing doubt to creep in where none should in truth exist".<sup>24</sup> This erosion of public confidence may have the dangerous consequence of creating unjustifiable scepticism amongst those charged with investigating and prosecuting all allegations of rape.

### 5.2. Research evidence on the prevalence of false allegations

Over the years a number of studies have looked at the prevalence of false allegations of rape (see Table 3). These studies suggest that the true prevalence of false rape allegations is considerably higher than the two per cent official rate. This inconsistency should not be viewed as a peripheral matter of little concern. It is an important issue not only to complainants but also to those suspected of rape. For example, if the true rate of false rape allegations

**Table 3**

Findings on the prevalence of false allegations of rape.

Authors	Year of study	Country	% of false allegations
HMCPSP <sup>26</sup>	2000	UK	8.3%
	2005	UK	10%
Ingemann-Hansen et al <sup>27</sup>	1999–2004	Denmark	10.5%
Feist et al <sup>12</sup>	2003–2004	UK	8%
Kelly et al <sup>18</sup>	2000–2002	UK	8.2% or 3% <sup>a</sup>
HMCPSP & HMIC <sup>28</sup>	2000	UK	11.8%
Jordan <sup>29</sup>	1997	New Zealand	41% <sup>c</sup>
Harris & Grace <sup>19</sup>	1996	UK	10.8%
Manser <sup>30</sup>	1990	UK	13.7% <sup>b</sup>
Kanin <sup>20</sup>	1978–1987	USA	45%

<sup>a</sup> This figure should be 4.4%. Out of 2,643 reported case of rape there were 216 (8.2%) that the police considered were false allegations. The authors looked at limited data from 144 of these cases and found 44 where the false allegation was probable, 33 where it was possible and 77 where it was uncertain. They recalculated the proportion of false complaints on the basis of the probable and possible cases (they say  $n = 67$  of 2,643) to obtain the 3% figure. However, they should have used  $n = 77$  ( $44 + 33 = 77$ ) and failed to increase this by a factor of 216/144 to arrive at the projected number of false allegations for the full sample of 216 cases.

<sup>b</sup> Figure is number of cases where the examining doctor considered the allegation to be "false or doubtful".

<sup>c</sup> Figure combines cases that the police designated as false and those in which the complainant said the allegation was false.

is considerably higher than for other serious offences, further consideration may need to be given to the vexed issue of anonymity for suspects/defendants of rape as well as for complainants.

Earlier this year, Baroness Vivien Stern published an independent review into how rape complaints are handled by public authorities in England and Wales.<sup>25</sup> She states that faster progress could be made in improving the treatment of rape complainants if more solid evidence about false rape allegations was in the public domain and recommends that the Ministry of Justice commissions and publishes independent research to study the frequency of false allegations of rape compared with other offences, and the nature of such allegations. This recommendation is to be welcomed as the research is long overdue.

### 5.3. False allegations – a summary

- There is little evidence to support the official 2% rate of false rape allegations
- Research is urgently required to look into the prevalence of false rape allegations compared to other offences and the nature of such allegations

## 6. The gender of sexual offence examiners

It has long been accepted that complainants of rape should be offered a choice when it comes to the gender of examining forensic physician<sup>31</sup> but there are now increasing calls for an all female service. A paper by Chowdhury-Hawkins et al purports to provide empirical evidence that female staff should be considered as the primary gender of staff providing services to complainant's of rape.<sup>32</sup> In order to support this contention, the authors quote three papers that are said to suggest that "both female and male victims prefer female staff caring for them following sexual assault". I have been unable to obtain a copy of one of the three papers cited, but analysis of the other two papers provides disappointingly little evidence to support this suggestion.

In one of the studies, conducted in 1995 in the Metropolitan and Sussex police areas, Temkin interviewed 10 forensic physicians involved in examining complainants of sexual assault, nine of whom were female.<sup>33</sup> Although Temkin quotes one police officer who told her that "most women prefer women doctors" no other evidence is presented that female victims express a gender



preference of examining doctor and there is no mention of male victims at all. Temkin goes on to describe some attitudes amongst the female doctors interviewed that tended for the most part to be judgemental not to say punitive in their attitude to many women who reported rape. For example, some of the responses she quotes are:

*If people are dressed in an alluring way, they are inadvertently giving out overt messages... they are saying yes without saying yes. I am afraid that when I hear there's been a rape my automatic reaction is to assume that it's going to be a waste of time...most of them are absolute rubbish.  
I would think that at least half are girls who decide to cry rape and then change their minds.*

The judgemental attitudes of these female forensic physicians would be viewed as totally unacceptable today and it is not surprising that Temkin concludes her research by suggesting that, although more needs to be done to recruit female sexual offence examiners, it does not follow that female doctors are well suited to performing these examinations simply because they are female.

The other paper quoted by Chowdhury-Hawkins et al as supporting the view that both male and female rape victims prefer to be examined by a female doctor actually provides no empirical evidence of a gender preference amongst complainants of either sex.<sup>34</sup> Indeed, it explicitly excludes consideration of male victims and concludes “that, on its own, recruitment of women FMEs is an insufficient response to the needs of rape complainants”. Although complainants were concerned by the lack of choice they were offered regarding the gender of the examining doctor, the gender did not appear to be the deciding factor in complainant's dissatisfaction with their medical examination. Whilst the ability to offer choice of clinician gender is desirable the authors consider that the use of “a professional with a real claim to expertise in such sensitive examinations” was the most important factor in meeting the needs of all concerned – the complainant, the police and the court.

The findings of Chowdhury-Hawkins et al have been criticised as being methodologically flawed not least because the study introduced an “irreparable selection bias” by failing to question any respondents who had experienced acute sexual assault care by a male doctor or male counsellor.<sup>35</sup> Chowdhury-Hawkins et al found that 81% of female complainants expressed a preference for a female doctor, which is in line with the 76% of women attending a family planning clinic who expressed a clear preference for a female doctor to undertake a pelvic examination.<sup>36</sup> However, one reason that women attend a family planning clinic rather than their GP is because they prefer to be examined by a female doctor and the authors of this paper acknowledge that this selection bias is likely to have resulted in a higher figure than otherwise would have been the case. In community-based studies without such a selection bias 43%<sup>37</sup> and 52%<sup>38</sup> of female patients expressed a preference for a female doctor to conduct a pelvic examination with 51% and 42% expressing no preference respectively.

However, clinician gender preferences of rape complainants are likely not only to be linked to the intimate nature of the medical examination, but also to the fact that the complainant has just been the alleged victim of an assault by a man. Women with a history of sexual trauma reported significantly higher levels of anticipated anxiety during intimate examination when clinician gender was male.<sup>39</sup> Taking this into account, together with one other UK research paper that suggests that 83% of complainants have a preference for a female examiner,<sup>40</sup> it seems reasonable to conclude that the vast majority of female complainants of rape would prefer to be examined by a female doctor.

### 6.1. Male complainants of sexual assault

But what of male complainants? There can be no doubt that, since the 1980s, the work of feminist campaign groups has done much to publicise the plight of rape victims and improve services for women who have been raped. However, it has been suggested that the publicity that rape has received as a feminist issue has contributed to the isolation experienced by male victims of rape.<sup>41</sup> It is important that the needs of male complainants are not forgotten when considering our response to sexual assault.

Official crime statistics reveal that there were 964 rapes of men recorded by the police in England and Wales during 2008/2009.<sup>2</sup> However, it seems that male rape victims, like their female counterparts, are unlikely to report their assault to the police.<sup>42</sup> Indeed, the British Crime Survey suggests that only 6% of men who have experienced a serious sexual assault report it to the police, compared to 12% of women.<sup>3</sup> Thus, the actual number of male rape victims is likely to be about 16,000 per year in England and Wales.

And what of the evidence about clinician gender preference amongst male complainants of rape? Certainly, two of the three papers quoted by Chowdhury-Hawkins et al as providing evidence to support their view that the majority of male complainants prefer female doctors are sadly wanting in such evidence and, in fact, do not consider male victims at all. Their own study included only nine male complainants, of whom 3 expressed a preference for a female doctor, one for a male doctor with the remaining 5 expressing no preference. Given the selection bias of the group studied and the limited number of men in the study, it would seem dangerous to assume that one can generalise from these findings.

Larger community-based studies conducted elsewhere amongst men undergoing intimate examinations provide conflicting results. Thus, in one study 51.5% of adult male patients expressed a preference for a male doctor when undergoing a genital examination.<sup>43</sup> By contrast, amongst adolescent males, the preference for a female physician during a genital examination was higher (49.2%) than preference for a male physician (39.1%). Clearly, further research is required before we can make any firm conclusions about clinician gender preference amongst male complainants of rape.

### 6.2. Gender of sexual offence examiner – a summary

- The evidence suggests that the majority of female complainants of sexual assault would prefer a female forensic physician to conduct their sexual offence examination
- The evidence is less clear for males
- Providing an all female service may deter some male complainants from undergoing medical examination
- For all complainants, the professionalism and expertise of the examining doctor appears more important than the gender
- The current level of research evidence does not support the marginalisation of skilled and empathic male forensic physicians from sexual offence work

## 7. A sexual assault referral centre (SARC) in every police force

There is strong evidence that SARCs are successful at providing appropriate treatment to complainants of recent sexual violence<sup>18,40</sup>. However, in terms of criminal justice outcomes, there is no firm answer to the question of whether, or to what extent, SARCs reduce attrition. Given that there is also an important gap in knowledge about the range and effectiveness of different models in the expanding SARC network, calls for a national, multi-site study of SARCs and their effectiveness appear well founded.<sup>44</sup>

Nonetheless, given the wide disparities in levels of service offered to complainants of sexual abuse in the UK,<sup>45</sup> a Home Office

pledge in 2008 to “more than double the current number of Sexual Assault Referral Centres (SARCs), to ensure that they are available to all victims of sexual violence by 2011,<sup>46</sup> was widely applauded. However, by the following year this pledge had been modified slightly to “a commitment to have a SARC in every police force area by 2011”.<sup>47</sup> This latter policy may not be so well conceived.

Police force boundaries have evolved over the years primarily on the basis of county borders. The populations served by each police force vary dramatically in terms of size and healthcare needs and the decision to create a SARC in every police force area appears to have been taken for political rather than strategic reasons.

Analysis of the numbers of rapes recorded by each police force area in 2002 indicates that there were fewer than 150 rapes reported to 15 of the 43 (35%) police forces in England and Wales.<sup>25</sup> Creating a SARC in these police force areas would result in the facilities only being used a few times a week. Without a considerably higher throughput of clients, staff are unlikely to develop the comparable expertise of those working in busier SARCs and the service provided will not be cost-effective.

This was one of the considerations of a Department of Health Working Group set up to draft guidelines for the examination of adult complainants of sexual assault that I had the pleasure of chairing. The Working Group recommended that responsibility for providing services to complainants of sexual assault should be transferred to the NHS and delivered through the creation of regional centres of excellence, to be known as Regional Sexual Assault Referral Centres.<sup>48</sup> These Regional SARCs would be ‘consultant’ led and would be responsible for:

- Undertaking the majority of sexual offence examinations in the region
- Training and development of sexual offence examiners
- Delivering quality assurance and clinical governance for the sexual offence service
- Providing expert evidence for the courts
- Undertaking research

Whilst the recommendation that the funding and commissioning of forensic medical services should be transferred from the police to the NHS has met with wholehearted support<sup>25</sup> the specific Government commitment to have a SARC in every police force area remains. It seems to me that this commitment is likely to waste precious resources and hinder the more strategic approach to service delivery recommended by the Working Group.

#### 7.1. Sexual Assault Referral Centres – a summary

- The funding and commissioning of sexual offence medical services should be transferred from the police to the NHS
- The commitment to provide a SARC in every police force is well-intentioned but misguided
- Sexual offence medical services would be best delivered through a smaller number of regional centres of excellence

## 8. Conclusion

Mr President, Ladies and Gentleman, as I hope I have demonstrated, rape is a unique crime surrounded by many myths and misunderstandings. Just as, over the centuries, the ambiguous depiction of the Rape of Leda sent out confusing messages about the very nature of rape, so have more modern myths about rape run the risk of confusing the thoughts of those who genuinely seek to improve the way rape is investigated and prosecuted. For example, for no other offence are there such concerns about a conviction rate that is so regularly and widely quoted without any proper

explanation, analysis and context. For no other offence is there so much controversy about the level of false allegations. I hope that I have been able to establish some of the reality, as far as it is known, about rape as well as identifying the need for more research so that we can gain a greater understanding of rape in all its complexities and develop a far more evidence-based approach to this terrible crime.

#### Ethical approval

None.

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None.

#### Conflict of interest

None declared.

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